Name in Full

Certificate of Death

Martha Ann Arnold

Died at Town: Queen Ann County: Prince George MARYLAND

Date 189 5 Month: Sept Day: 6th Age Y. 28 M. 4 D. 10 Native of Md Occupation Housewife

~~Male~~ Female

White ~~Colored~~

Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~

Number of children living 2

~~Husband~~ ~~Wife~~ of wife James Arnold

Father's Name Archibald Roberts Mother's Name Martha Ann Roberts

Cause of Death: Primary General Dropsy 57 How long sick 3 months

Immediate Valvular disease of heart ~~Accident, Suicide, Homicide~~

Reported by John Peach M D

Address Mitchellsville P. G. Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65988

Name in Full

Certificate of Death

William H. Barrett

Town: Oxen Hill

County: Prince George

Died at MARYLAND

Date 189 8 — Month: 9 d — Day: 24 d

Age — Y. 75 M. [illegible] D. — Native of Prince Georg — Occupation Farmer

Male / ~~Female~~ — White / ~~Colored~~ — Married / ~~Single~~ — ~~Widow~~ / ~~Widower~~ — ~~Divorced~~

Number of children living 5

Husband / ~~Wife~~ of Rebekah Barrett

Father's Name

Mother's Name

Cause of Death — Primary: Exhaustion of R. Pemble — How long sick 2 yrs 7 mo's

Immediate: Exhaustion 25 d

~~Accident, Suicide, Homicide~~

Reported by E. P. Simpson M. D.

Address Oxen Hill Pr. Geo. Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. BOSTON

Name in Full Bowie Certificate of Death

Harriet Underwood

Died at Town Clinton County P. G. Co MARYLAND

Date 1898 Month Sept Day 2d Age Y. 84 M. 3 D. Native of Md Occupation ✗

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living

Husband Wife of ✗

Father's Name William Bowie Mother's Name Viola Bowie

Cause of Death { Primary Marasmus 8 2 How long sick

Immediate Exhaustion. Accident, Suicide, Homicide

Reported by J. L. Waring

Address Clinton

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Hunter Somervell Bowie

Died at Town: Upper Marlboro' County: Pr. George's MARYLAND

Date 189 5 Month: 9 Day: 24 | Age Y. 5 M. 6 D. 13 | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name: R. Somervell Bowie

Mother's Name: Lena Hunter Bowie

Cause of Death: Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by: Pr. George's Enquirer (Upper Marlboro')

Address: 9-30

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868

Name in Full

Certificate of Death

Mildred Bowling

Died at Town Upper Marlboro County Prince Georges MARYLAND

Date 189 8 Month Sept. Day 21 | Age Y. 2 M. D. | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living

~~Husband~~ ~~Wife~~ of

Father's Name J. Dominic Bowling

Mother's Name

Cause of Death { Primary 161 | Immediate | How long sick

Accident, Suicide, Homicide

Reported by Dr. Georges Engenier Sept 23rd

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6506R

Dr. L. A. Griffith. Upper Marlboro.

Name in Full

Certificate of Death

George L Bridwell,

Died at Bladensburg (Town) Prince George (County) State of MARYLAND

Dato 1894 Month Sept. Day 3 | Y. M. D. Age about 45 | Native of Pr Geo Co. | Occupation Painter

Male / ~~Female~~ | White / Colored | Married / Single | Widow / Widower | Divorced / Number of children living

Husband / Wife of Emiglia

Father's Name dead

Mother's Name Mary Bridwell

Cause of Death — Primary: Stomach

Immediate: Acute Gastritis 2 d. [illegible] 48

How long sick

Accident, Suicide, Homicide

Reported by Francis Gaseh, Undertaker

accident caused by heart trouble

Address Bladensburg, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

over

LIBRARY BUREAU. 65068

Attended by Dr.----------

of----------

Seen by Coroner--Alfred Bailey Nov. 14

of-----Bladensburg Md.

Replied Dec. 1

Name in Full: John Francis Boiseor — Certificate of Death

Died at: Town: Brandywine — County: Pr. Georges — MARYLAND

Date 189 8: Month: Sept. — Day: 26 — Age: Y. 67 M. 8 D. — Native of: Md — Occupation: Laborer

Male / ~~Female~~ — ~~White~~ / Colored — Married / Single / ~~Widow~~ / ~~Widower~~ / ~~Divorced~~ — Number of children living: 5

~~Wife~~ Husband of: Jane Gray

Father's Name: Isaac Bisco — Mother's Name: Maria Addison

Cause of Death — Primary: Softening of Brain X 13 — How long sick: 25 days

Immediate: failure of Nutrition

~~Accident, Suicide, Homicide~~

Reported by: John R. Cox M.D.

Address: J.B. [redacted] Pr. Geo. Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068

Name in Full

Isabel Butler

Certificate of Death

Died ~~at~~ Near Town Surrattsville County Prince George's MARYLAND

Date 189 8 Month Sept. Day 6 | Age Y. 7 M. 6 D. 6 | Native of Maryland | Occupation

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ ~~Number of children living~~

~~Husband~~ Wife of

Father's Name John Henry Butler

Mother's Name Isabel Butler

Cause of Death { Primary Diphtheria & | How long sick one week

Immediate Heart failure

~~Accident, Suicide, Homicide~~

Reported by John A Cox MD.

Address J.B. & P. R.R. Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Md

LIBRARY BUREAU, 65968

Name in Full Susan R. Cook

Certificate of Death

Died at Town Upper Marlboro County Pr. George's MARYLAND

Date 189 F Month 9 Day 26 Age Y. 6 M. 11 D. Native of Occupation

~~Male~~ Female White ~~Colored~~ ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ Number of children living

Husband of Wife

Father's Name Jas. E. Cook

Mother's Name Maggie M. Cook

Cause of Death { Primary 161 How long sick

Immediate Accident, Suicide, Homicide

Reported by Pr. George's Enquirer

Address Upper Marlboro

9-30

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66868

Name in Full George W. Coombs

Certificate of Death

Died at Town Accokeek County Prince Georges MARYLAND

Date 189 8 Month Sept. Day 25th Age Y. 86 M. D. Native of Maryland Occupation Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living 20

Husband ~~Wife~~ of Katie Dixon (3rd wife)

Father's Name Aloysius Coombs Mother's Name (Unknown)

Cause of Death: Primary Typhoid Fever — Age- How long sick 3 1/2 mts.

Immediate Exhaustion

~~Accident, Suicide, Homicide~~

Reported by W. A. Tolis M.D.

Address Accokeek P. G. Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55875

Name In Full

Not named Duley

Certificate of Death

Died at Town: Lerose Sta County: Pr Geo Co MARYLAND

Date 1898 Month: 9 Day: 7 | Age Y. 1½ M. D. | Native of: Md | Occupation: None

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband / Wife of

Father's Name: Edward A Duley

Mother's Name: Lilly May Beall

Cause of Death: Primary: Premature 1386 | How long sick:

Immediate: No vitality | Accident, Suicide, Homicide

Reported by: W H Gibbons MD

Address: Lerose Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Washington Fletcher

Certificate of Death

Died at Town: Seat Pleasant County: Prince George MARYLAND

Date 189 8 Month: Sept Day: 12

Age Y. 36 M. — D. —

Native of Maryland

Occupation Laborer

Male ~~Female~~

~~White~~ Colored

Married ~~Single~~

~~Widow~~ ~~Widower~~

~~Divorced~~

Number of children living 14

Husband ~~Wife~~ of Henretta Fletcher

Father's Name Dennis Fletcher

Mother's Name Jane Fletcher

Cause of Death: Primary Typhoid Fever 1 — How long sick 7 weeks

Immediate Cerebral Hemorrhage

~~Accident, Suicide, Homicide~~

Reported by John E Sansbury M.D.

Address Forestville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65988

Name in Full

Certificate of Death

Julia L. Gardner

Died at Upper Marlboro Town, Pr. Geo. County, MARYLAND

Date 189 8 Month Sept Day 20 | Age Y. 39 M. D. | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ Number of ~~children~~ living

~~Husband~~ ~~Wife~~ of

Father's Name John E. Gardner | Mother's Name A

Cause of Death: Primary 161

Immediate

How long sick

Accident, Suicide, Homicide

Reported by Pr. Geo. Engineer 23rd Sept.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full [redacted] Harper — Certificate of Death

Died at Baden — Town — P.G. Co. — County — MARYLAND

Date 1898 — Month Sept — Day 1 — Age Y. 11 M. D. — Native of Md — Occupation None

~~Male~~ Female — ~~White~~ Colored — ~~Married~~ Single — ~~Widow~~ ~~Widower~~ — ~~Divorced~~ Number of children living

~~Husband~~ ~~Wife~~ of [redacted]

Father's Name John Hoye — Mother's Name Eliza Harper

Cause of Death — Primary Typhoid Fever 9 — How long sick

Immediate Don't know did not see one — Accident, Suicide, Homicide

Reported by Dr Wheelbrow

Address Lerow Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Dominic Moran

Died at Upper Marlboro (Town) Prince (County) MARYLAND

Date 1918 Month 9 Day 30 | Age Y. 31 M. 4 D. 5 | Native of Maryland | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | Widow ~~Widower~~ | ~~Divorced~~ Number of children living

Husband of
Wife

Father's Name William E. Moran | Mother's Name Sarah A Moran

Cause of Death: Primary Peritonitis | How long sick 6 days

Immediate | Accident, Suicide, Homicide

93

Reported by

Address Rowdy Dosser MD Upper Marlboro Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66868

Name in Full

Certificate of Death

Dominic Moran

Died at Upper Marlboro (Town) Pr. George (County) MARYLAND

Date 189 8 Sept 30 | Age Y. 36 M. D. | Native of | Occupation

Male White Married Widow Divorced

~~Female~~ ~~Colored~~ Single Widower Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death: Primary Peritonitis 93 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Enquirer Oct 7 11

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU

Dr. Revd. Sarsen, Upper Marlboro

Name in Full

Certificate of Death

Thomas Alton Porter

Town

Oxon Hill

County

Prince George

Died at

MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Date 1898	9th	9th	Age 10		Prince Md	

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

Husband / Wife of

Father's Name H. Porter (deceased)

Mother's Name Mary

Cause of Death: Primary — Enteric Fever

Immediate — Exhaustion Dysentery

How long sick 25 days

Accident Suicide, ~~Homicide~~

Reported by E. P. Simpson M.D.

Address Oxon Hill Prince Geo. Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON

Name in Full

Certificate of Death

Mrs. Alice Bowie Roberts.

Died at Clifton Town Mond County Pr. George's MARYLAND

Date 189 8 Sept 19 Month Day Age Y. M. D. Native of / Occupation

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living

~~Husband~~ Wife of T. O. W. Roberts.

Father's Name Wm. Geo. C. Bowie Mother's Name

Cause of Death { Primary 161 How long sick

Immediate Accident, Suicide, Homicide

Reported by Pr. Geo. Enquirer. Sept. 23rd

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 16588

Name in Full Eliza Smith — Certificate of Death

Died near Town Meetwood County Prince Geo. Co MARYLAND

Date 189 8 Month Sept. Day 4th | Age Y. 20 M. – D. 25 | Native of Maryland | Occupation Housewife

~~Male~~ nearly White | Married | ~~Widow~~ | ~~Divorced~~

Female Part Colored | ~~Single~~ | ~~Widower~~ | ~~Number of children living~~

Husband of William Smith

Wife 116

Father's Name Bradley Perry

Mother's Name Elizabeth Perry

Cause of Death — Primary: Nausea & Vomiting of Pregnancy — How long sick 3 months

Immediate: Catarrh of Stomach, inanition and exhaustion

~~Accident, Suicide, Homicide~~

Reported by Wm. A. Warburn M.D.

Address Agnew Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6888B

Name in Full

Certificate of Death

David B. Ithelock

Town

Died at Bladensburg

County

Prince George MARYLAND

Date 189 8 Month 4 Day 4 | Age Y. 55 M. D. | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ ~~Widowed~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | ~~Number~~ of children living

~~Husband~~ ~~Wife~~ of Martha (Nichols) Ithelock

Father's Name | Mother's Name

Cause of Death { Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Marlboro' Gazette 9-9

Address Upper Marlboro'

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 67668

Name in Full

Certificate of Death

George Wilkinson

Town

Died at Aquasco

County

Pr. Geo's

MARYLAND

Date 189 8 Month Sept Day 30

Age Y. 54 M. abt D.

Native of Md

Occupation Planter

Male ~~Female~~

White ~~Colored~~

Married ~~Single~~

~~Widow~~ ~~Widower~~

~~Divorced~~

Number of children living 12

Husband / Wife of Josephine Wilkinson

Father's Name Francis Wilkinson

Mother's Name Mary Adams Martin

Cause of Death — Primary: Obstruction of Bowels — How long sick 6 days

Immediate: Uremia

~~Accident, Suicide, Homicide~~

Reported by M. P. Latimer M.D.

Address Aquasco Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

William Edward Woolford

Died at Town Cheltenham (House Reformation) County Pr Ges Co MARYLAND

Date 189 8 Month 9 Day 17 | Age Y. 14 M. D. | Native of Md | Occupation Inmate

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | Divorced ~~Number of children living~~

Husband of ~~Wife~~

Father's Name Alex Woolford | Mother's Name ~~Kate~~ Hamilton

Cause of Death: Primary Typhoid Fever 1 | How long sick 2 months

Immediate Exhaustion | ~~Accident, Suicide, Homicide~~

Reported by W. T. Gibbons M.D.

Address Cheltenham Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968